

Place Site Visit
Label Here

Site Visit Form

(One Station per page)

STORET Project ID: _____

STORET Trip ID : _____

Date: _____ Time: _____ Personnel: _____

Waterbody: _____ Location: _____

Station ID: _____ Visit #: _____ HUC: _____ County: _____

Latitude: _____ Longitude: _____ Lat/Long Verified? ☐ By: _____

Elevation (m): _____ GPS Datum: NAD27 **NAD83** WGS84

Samples Collected:	Sample ID (Provide for all samples):	Sample Collection Information/Preservation:
Water <input type="checkbox"/>		GRAB
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL None
Sediment <input type="checkbox"/>		SED-1
Analysis:		Preserved: None Other:
Analysis:		Preserved: None Other:
Chlorophyll a <input type="checkbox"/>		C=Core H=Hoop T=Template N= No Sample
Composite at Lab <input type="checkbox"/>	Transect: 1____ 2____ 3____ 4____ 5____ 6____ 7____ 8____ 9____ 10____ 11____	
Phytoplankton <input type="checkbox"/>		R1 Filtered: _____mL R2 Filtered: _____mL
Algae <input type="checkbox"/>		PERI-1 OTHER:
Macroinvert. <input type="checkbox"/>		KICK HESS JAB OTHER:
Kick/Jab Length (ft):	Kick Duration/# Jabs:	# of Jars:
		Mesh Size: 1200 1000 500 OTHER:

Field Measurements:	Field Assessments:
Water Temp: _____ °C °F	Air Temp: _____ °C °F
pH: _____	SC: _____ (umho/cm)
DO: _____ (mg/L)	Flow: _____ (cfs)
Flow Comments: Dry Bed <input type="checkbox"/> No Measurable Flow <input type="checkbox"/>	Substrate: Pebble Count <input type="checkbox"/> Percent Fines <input type="checkbox"/> RSI <input type="checkbox"/>
Flow Method: Meter <input type="checkbox"/> Float <input type="checkbox"/> Gage <input type="checkbox"/> Visual Est. <input type="checkbox"/>	Channel Cross-Section <input type="checkbox"/>
Turbidity: Clear <input type="checkbox"/> Slight <input type="checkbox"/> Turbid <input type="checkbox"/> Opaque <input type="checkbox"/>	Photographs: Digital <input type="checkbox"/> Film <input type="checkbox"/>

Site Visit Comments:	

Chemistry Lab Information:		
Lab Samples Submitted to:	Account #:	Date Submitted:
Invoice Contact & Address:		
Contact Name & Phone:		
EDD <input checked="" type="checkbox"/> Format: SIM Compatible	Term Contract Number:	
Relinquished By & Date/Time:	Shipped By & Date/Time:	Received By & Date/Time:
Relinquished By & Date/Time:	Shipped By & Date/Time:	Received By & Date/Time:
Relinquished By & Date/Time:		Received By & Date/Time:

Lab Use Only - Delivery Temperature (°C): _____

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Site Visit Form Instructions

1. Place a Site Visit Code label in the upper left corner (ONLY 1 SITE VISIT CODE PER FORM).
2. Place a Trip Label in the upper right corner. (Covering Project ID and Trip ID with label is alright.)
3. **STORET Project ID:** If you do not have a Trip Label, enter the Project ID assigned by Data Management. If Project ID is not assigned, leave blank for STORET Database Manager.
4. **Trip ID:** If you do not have a Trip Label, enter the Trip ID assigned by Data Management. If Trip ID is not assigned, leave blank for STORET Database Manager.
5. **Date/Time:** Enter the date and time of the station visit.
6. **Personnel:** Enter the first and last name(s) of the personnel conducting field activities.
7. **Waterbody:** Enter the name of the waterbody such as "Missouri River".
8. **Location:** Description of sample location such as "upstream from bridge on Forest Service road 100". For confidentiality please DO NOT use proper names of people in the location field.
9. **Station ID:** If you have a Trip Label, enter the established ID. If there is no ID on the Trip Label, leave the field blank and Data Management will generate a Station ID when the SVF is submitted.
10. **Visit #:** Enter "1" if this is a new station. Leave blank if visit number is unknown.
11. **HUC:** If you do not have a Trip Label, enter the fourth code (8 digit) HUC the station falls within.
12. **County:** If you do not have a Trip Label, enter the county in which the station falls within.
13. **Lat/Long:** Latitude and Longitudes should be obtained in decimal degrees using a GPS unit reading **NAD83** whenever possible. If a lat/long is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
14. **Lat/Long Verified:** Latitudes and Longitudes should be verified immediately upon return from the field. Verify by plotting on a paper map or using a mapping website. Once the lat/long has been verified check the Verified box and enter initials after "By".
 - Do not make minor adjustments to measured values during verification; they are assumed to be correct within the limitations of the measurement system.
 - Gross errors should be corrected as follows: 1) Draw a single line through the erroneous value(s) and initial. Do not erase the original reading. 2) Write the corrected value in the comment field along with the method and datum used to derive the corrected value.
15. **Elevation:** Record elevation collected by GPS and circle the GPS datum used. If elevation is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
16. **Samples Collected:** Check the box next to each activity that is collected during the station visit.
17. **Sample ID:** Write the Sample ID (Site Visit Code-sample identifier) for all of the samples collected.
18. **Sample Collection Procedure:** Circle the appropriate Sample Collection Procedure ID.
 - For Chlorophyll a, record the sample collection ID for each transect in the spaces provided.
 - For Phytoplankton, record the volume filtered for each sample collected.
19. **Analysis Requested:** Record the requested laboratory analysis for each chemistry sample and circle the preservative used.
20. **Field Measurements:** Record your field measurements in the spaces provided.
21. **Field Assessments:** Check the boxes next to each type of field assessment completed.
22. **Site Visit Comments:** Record general comments about the station visit, samples, and field measurements.
23. **Chemistry Lab Information:** If chemistry lab samples were taken, complete this section.
 - Lab Samples Submitted to: Enter name of laboratory where samples will be sent.
 - Account #: Enter account number at laboratory where samples will be sent.
 - Date Submitted: Record date the samples were received by the laboratory.
 - Sign and date the form each time the samples change possession.